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CHANGE OF CORRESPONDENCE ADDRESS <i>Application</i>		Application Number	10/595,755 - Conf. No. 6026
Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		Filing Date	May 9, 2006
		First Named Inventor	Robert-Matthias Leiser
		Art Unit	Not Yet Assigned
		Examiner Name	Not yet Assigned
		Attorney Docket No.	37998-237487

Please change the Correspondence Address for the above-identified application to:

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I am the:

Applicant/Inventor
 Assignee of record of the entire interest.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 Attorney or agent of record. Registration Number 54,262.
 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.

Signature	<u>Kavita B. Lepping</u>		
Typed or Printed Name	Kavita B. Lepping		

Date	April 20, 2007	Telephone	(202) 344-4000
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

<input checked="" type="checkbox"/> *Total of <u>1</u> Form is/are submitted.
